

APR 08 2005

P/4076-56

*Lee
Dony*

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Fan Wang et al.

Serial No.: 10/618,297

Filed: July 11, 2003

Date: April 8, 2005

Group Art Unit: 2878

Examiner: Patrick J. Lee

For: MISSING DIE DETECTION

VIA FACSIMILE (703) 872-9306

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT/SUBMISSION

In response to the Office Action mailed January 11, 2005, please reconsider the above-

04/13/2005 DBELL1 0000008 150700 10618297
identified application amended as follows:

01 FC:1202

300.00 DA

FEE CALCULATION

 No Additional Fee is Required

Any additional fee required has been calculated as follows:

 If checked, "Small Entity" status is claimed.

NO. OF CLAIMS	PER THIS RESPONSE	PREVIOUSLY PAID FOR	ADD'L CLAIMS	RATE	AMOUNT DUE
TOTAL	39 MINUS	33 • =	6	X (\$25 SE or \$50)	\$ 300.00
INDEP.	2 MINUS	3 ** =	0	X (\$100 SE or \$200)	\$.
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					X (\$180 SE or \$360) \$
• not less than 20 ** not less than 3					TOTAL \$ 300.00

 If any additional payment is required, a check which includes the calculated fee of \$ _____ (OFGS Check No. _____) is attached.

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Please charge the above calculated fee to our Deposit Account No. 15-0700.

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

CONTINGENT EXTENSION REQUEST

If this communication is filed after the shortened statutory time period had elapsed and no separate Petition is enclosed, the Commissioner of Patents and Trademarks is petitioned, under 37 C.F.R. §1.136(a), to extend the time for filing a response to the outstanding Office Action by the number of months which will avoid abandonment under 37 C.F.R. §1.135. The fee under 37 C.F.R. § 1.17 should be charged to our Deposit Account No. 15-0700.

AMENDMENTS

If checked, amendment(s) to the specification are submitted herewith.

If checked, an amended abstract is submitted herewith.

If checked, amendment(s) to the claims are submitted herewith.

If checked, amendment(s) to the drawings are submitted herewith.

as well as original claims 2-17, and 9-33, and new claims 36 and 39, are dependent on allowable claim 1 or 18, and are patentable for the reason stated above.

In view of the foregoing, favorable reconsideration and allowance of this application are respectfully solicited.

I hereby certify that this correspondence is being transmitted by Facsimile to (703) 872-9306 addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Lawrence A Hoffman
Name of applicant, assignee or
Registered Representative

Lawrence A Hoffman

Signature

April 8, 2005
Date of Signature

LAH:gl

Respectfully submitted,

Lawrence A Hoffman

Lawrence A Hoffman
Registration No.: 22,436
OSTROLENK, FABER, GERB & SOFFEN, LLP
1180 Avenue of the Americas
New York, New York 10036-8403
Telephone: (212) 382-0700

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PATENT APPLICATION FEE DETERMINATION RECORD
 Substitute for Form PTO-875
Application or Docket Number
*10/618297***CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

SMALL ENTITY

OR

RATE	FEES
	\$395
x \$25 =	
x \$100	
+ \$180	

TOTAL

OTHER THAN SMALL ENTITY

RATE	FEES
	\$790.00
x \$50 =	
x \$200	
+ \$360	

OR TOTAL

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	" 33	= 6
Total (37 CFR 1.16(c))	39			
Independent (37 CFR 1.16(b))	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

SMALL ENTITY

OR

RATE	ADDITIONAL FEE
x \$25 =	
x \$100	
+ \$180	

TOTAL ADD'L FEE

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
x \$50 =	
x \$200	
+ \$360	

TOTAL ADD'L FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	**	=
Total (37 CFR 1.16(c))	*			
Independent (37 CFR 1.16(b))	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDITIONAL FEE
x \$25 =	
x \$100	
+ \$180	

TOTAL ADD'L FEE

RATE	ADDITIONAL FEE
x \$50 =	
x \$200	
+ \$360	

TOTAL ADD'L FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	**	=
Total (37 CFR 1.16(c))	*			
Independent (37 CFR 1.16(b))	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDITIONAL FEE
x \$25 =	
x \$100	
+ \$180	

TOTAL ADD'L FEE

RATE	ADDITIONAL FEE
x \$50 =	
x \$200	
+ \$360	

TOTAL ADD'L FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.